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PATENT APPLICATION
Attorney's Do. No. 8371-114

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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I HEREBY CERTIFY THAT THIS PAPER AND ENCLOSURES AND/OR FEE ARE BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO: BOX PATENT APPLICATION, ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON D.C. 20231.

EHREN RHEA

(SENDER'S PRINTED NAME)

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(SIGNATURE)

Box Patent Application
Assistant Commissioner for Patents
Washington, DC 20231

Enclosed for filing is a patent application under 37 CFR 1.53(b) of:

Inventors: Andrew Rodney Ferlitsch and Kevin James Baker

For: METHOD AND SYSTEM FOR INSTANT FAX TRANSMISSION

This application is a ☐ continuation, ☐ divisional, ☐ continuation-in-part of prior application Serial No. _____, filed _____.

Prior application info: Examiner: _____ Group Art Unit _____

Applicant requests FIG. ____ to be published with the application.

Enclosures:

- ☒ Specification (pages 1- 8); claims (pages 9-10); abstract (page 11)
- ☒ 3 sheets of FORMAL drawings
- ☒ Declaration or Combined Declaration and Power of Attorney
- ☒ Newly executed (original or copy)
- ☐ Copy from a prior application (37 CFR 1.63(d))
- ☐ Incorporation by Reference--The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
- ☐ Deletion of Inventors (signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))
- ☐ Power of Attorney
- ☒ Assignment with cover sheet

Assignee Name and Address: Sharp Laboratories of America, Inc.
5750 N.W. Pacific Rim Boulevard
Camas, Washington 98607

- ☐ Certified copy of priority document
- ☐ Request for Nonpublication
- ☐ Information Disclosure Statement with Form PTO 1449
- ☐ Copies of references listed on attached Form PTO-1449
- ☐ Preliminary Amendment
- ☐ Change of Address
- ☒ Return Postcard

CLAIMS AS FILED				
For	Number Filed	Number Extra	Rate	Basic Fee \$710.00
Total Claims	19-20		x \$ 18 =	
Independent Claims	3-3		x \$ 80 =	
Multiple Dependent Claim Fee			x \$270 =	
TOTAL FILING FEE				\$710.00

- ☐ Cancel in this divisional application original claims _____ of the prior application Serial No. _____ before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
- ☒ A check in the amount of \$750.00 to cover ☒ filing fee (\$710.00) and ☒ assignment recordal fee (\$40.00) is enclosed.
- ☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.



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PATENT TRADEMARK OFFICE

Respectfully submitted,

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